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PTO/SB/31 (09-04)
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| NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES | | Docket Number (Optional) 010093 | |
|--|--|---|---------------------------------|
| I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 [37 CFR 1.8(a)] on _____ Signature _____ Typed or printed name _____ | | In re Application of Yasuo ONISHI | |
| | | Application Number 09/774,099 | Filed January 31, 2001 |
| | | For DISPLAY DEVICE AND PIXEL CORRESPONDING DISPLAY DEVICE | |
| | | Art Unit 2629 | Examiner Alecia Diane Nelson |
| Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner. | | | |
| The fee for this Notice of Appeal in (37 CFR 41.20(b)(1)) | | | |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR § 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: | | \$ _____ | |
| <input checked="" type="checkbox"/> A check including the amount of \$500.00 the appeal fee is enclosed. | | \$500.00 | |
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| <input checked="" type="checkbox"/> A petition for extension of time under 37 CFR1.136(a) (PTO/SB/22) is enclosed. | | \$450.00 | |
| | | TOTAL \$950.00 | |
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| I am the | | | |
| <input type="checkbox"/> applicant/inventor. | |  Signature | |
| <input type="checkbox"/> assignee of record of the entire interest. (See 37 CFR3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). | | Thomas E. Brown Typed or printed name | |
| <input checked="" type="checkbox"/> attorney or agent of record. Registration number <u>44,450</u> | | 202-822-1100 Telephone number | |
| <input type="checkbox"/> attorney or agent acting under 37 CFR1.34. Registration number if acting under 37 CFR 1.34 _____ | | June 26, 2006 Date | |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*. | | | |
| <input type="checkbox"/> *Total of _____ forms are submitted. | | | |

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